Martinsburg VA Medical Center • Washington DC VA Medical Center • VA Maryland Health Care System

## **Nicholson Takes the Helm as Secretary of Veterans Affairs**

James "Jim" Nicholson was sworn in as Secretary of Veterans Affairs on February 1, 2005. President Bush nominated him to the position on December 9, 2004, and he was confirmed by the Senate on January 26, 2005.

During testimony at his confirmation hearing before the Senate Veterans' Affairs Committee on January 24th, Nicholson said a background in the military helped prepare him for his new job. The West Point graduate served eight years on active duty, including combat duty in Vietnam, and 22 years in the Army Reserve.

"I have had the privilege of wearing the uniform of the United States Army in combat," he told the committee, "so I have seen both the horrors of war and the heroes of America making the greatest sacrifices of military service on behalf of their comrades and our nation."

"One cannot leave a battlefield without having a profound respect for the courage and cool of all who served there," he continued. "Their example of unwavering commitment to their mission, no matter how dangerous and uncomfortable, will always reverberate with me, and readies me for a mission of service to those veterans."

Nicholson emphasized that he will continue to work closely with the Department of Defense to ensure a seamless transition for servicemembers returning from the conflicts in Afghanistan and Iraq. "The manner in which the VA supports the transition of today's servicemembers into veterans, especially those who are injured or become ill as a result of their service in combat areas, will define the Department for them," he said.

Nicholson praised his predecessor as "a man who has provided outstanding leadership and tireless dedication to the welfare of his nation's veterans." He pledged to build on the "terrific strides" VA made in health care, benefits delivery and memorial affairs during Secretary Principi's tenure. "I will strive to move the department to another level, by building on all that has been put in place and improving upon these areas that remain a challenge," he said.

He also told the committee he would focus much of his attention on VA's 230,000 employees. "I am deeply committed to earning the respect, trust and following of the men and women of the VA who have made service to veterans their life's calling. The VA workforce represents an enor-

mous reservoir of dedicated, committed talent that must be put to its best possible use," Nicholson said.

The new Secretary, 66, is a native of Iowa. His older brother, Jack, served as VA Under Secretary for Memorial Affairs from 2003 to 2005.



Nicholson, an attorney, most recently served as U.S. Ambassador to the Vatican. Prior to that, he was chairman of the Republican National Committee from 1997 to 2001. He has also been a housing developer in his home state of Colorado.

"I will hold myself and my leadership team accountable for ensuring and harnessing our employees' best efforts. It will be my job and my privilege to lead and harness this awesome force of talented people so that all of us have the same focus: our veterans. It is critical that we honor America's debt to those who served us so faithfully."

Reprinted with permission from the January/February 2005 issue of VAnguard.

# Vets Get Top Care from VA, Says RAND Study

atients in the VA health care system receive significantly better care than private-sector patients, according to a recently released independent study. "VA's patients know they get first-class care when they come to us," said former Secretary of Veterans Affairs Anthony J. Principi. "This study confirms what our patients already know - that VA is leading the health care industry in this country."

The study by RAND, an independent think-tank, found that VA patients were significantly more likely than non-VA patients to receive needed preventative care. The study also found that VA patients with chronic medical problems received the treatment they needed more often than private-sector patients.

Continued on page 3

#### INSIDE

page 2 Fr

From the Desk Of Dr. Nocks

page 3

VA News

page 👍

Martinsburg VA Medical Center

page **5** 

VA Maryland Health Care System

page 6

Washington DC VA Medical Center

SPRING 2005

### VISN 5 NEWS & HAPPENINGS



e are honored by the opportunity to provide services and assistance to eligible veterans who fought and served in our nation's armed forces. Operation Enduring Freedom (OEF) troops are currently on the ground in Afghanistan, Pakistan, and neighboring countries of the former Soviet Union. Operation Iraqi Freedom coalition forces remain in Iraq today as part of ongoing peacekeeping and nation-building activities.

As in all hazardous operations abroad, some servicemembers return with deployment-related health problems. In Afghanistan and Iraq, troops are especially at risk for local infectious diseases, traumatic injuries and injuries due to cold exposure. Some returning troops come back with mental health problems that can result from surviving any dangerous, life-threatening experience.

In 2004, the VA Capitol Health Care Network provided service to approximately 125,000 veterans, and we expect to see an increased number of veterans this year and into the future as they return from Iraq and Afghanistan. With challenging budgets, we need to be even more efficient – helping to assure that patients keep scheduled appointments, working to prevent clinic cancellations, and ensuring that all inventories are accurate and supplies are ordered in a timely manner. We also need to assure that we capture accurate information from our patients to enable us to bill insurance companies when appropriate, and to identify the type of care provided in order for us to get full reimbursement. Attention to detail must be more exact than ever, and we need to look for process improvements throughout our organization.

At VA, we are privileged every day to care for those who ensured America's freedom and strength. Our patients hold a special place in our hearts. We are pledged to do all that we can to alleviate their pain, but they are more than "patients" – they are "veterans." Many of them are separated from family and friends, suffer physical or emotional pain, and face an uncertain future. There are no words that can adequately express what their sacrifices have meant to this nation, but we can take time to express our personal thanks and appreciation by giving our best, which is a small price when compared to what they have paid.

Sincerely,

James J. Nocks, MD, MSHA

and When No

Director, VA Capitol Health Care Network

#### Letters

Dear Staff of the VA Capitol Health Care Network:

I am writing in response to the tremendous outpouring of support that we have received from all of you. First off, let me say that all of us here, no matter what background or branch of service, appreciate all that the people back home are doing for us. We have all become a big family and support each other through the good and bad times.

My Marines and I have learned much on this trip about each other and about ourselves. We have also learned that we are here to support all of you. Our time here has been busy and full of interesting things, all of which has served as a growing experience for each of us. We have all seen and performed duties that will never be seen on the six o'clock news. Despite all that you may witness on television and read in the newspapers, most of the people here are very receptive to us and are merely getting used to the idea that they can say and do things now that before would have endangered their lives. Some people have never seen this type of hardship, so they fail to realize the importance of these basic rights and they attempt to condemn the U.S. for the actions taken. I am sorry for delving into the political side of the issue, as that was not my intent. I am hoping to enlighten all of those who continue to support the troops here about our goals and accomplishments.

Once again, thank you for all of your support and for all of the cards and letters that you and your families have sent to us. Our military personnel are the greatest Americans like each and every one of you. May all of your lives be blessed with the same happiness that you bring to us through your support.

Sincerely, A U.S. Marine in Iraq

### **Editorial Box**

The Capitol Connection is published for the employees, volunteers, retirees and friends of the VA Capitol Health Care Network (VISN 5). To submit articles, editorials, letters or story ideas for possible inclusion in the Capitol Connection, please send them on Exchange Mail to "VISN5 Employee Newsletter" or contact the Newsletter Editor at (410) 605-7101. The Editorial Board reserves the right to make changes and/or edits to any submission chosen for publication.

NETWORK DIRECTOR James J. Nocks, MD, MSHA

EDITOR R. David Edwards EDITORIAL BOARD

Barbara B. Corbin Kenya N. Griffin Kenneth Sliker Monica A. Smith Michelle B. Spivak Terry A. Ross

**EDITORIAL ASSISTANTS Cindy Bailey** Sarah Diehl Michelle Foltz **Margaret Hornberger** 

Molly Majka



#### **VA NEWS**

## Farewell Message from Anthony J. Principi

or me, time committed to the service **◄** of others, working shoulder-to-shoulder with capable and committed coworkers, is the most important attribute of a life well lived. For the past 46 months, I have been privileged to share with you our stewardship of VA's mission of service to veterans. I am humbled to have worked sideby-side with you, the men and women who bring VA to life, as you demonstrated every day an all encompassing commitment to our mission and documented your skills in the changed lives of the veterans we serve. Our mission is profoundly satisfying, and you earned your place in the first rank of competence and compassion.

You rose too, and surmounted the repeated challenges of our critical mission, overcoming changing circumstances and unexpected difficulties. I stand in awe of the long hours, diligent attention to the highest

standards, and commitment to constant improvement that defined our Department over the past four years. Your record, in both our operating Administrations and our staff offices, is written in the text of increased access to ever higher quality healthcare, improved delivery of benefits and services, and the national shrines defin-

ing our cemetery system. Your work illuminates the finest in public service, and I know that whatever praise I hear of our Department was earned through your effort.

I depart VA to take on new responsibilities and challenges moved by the service of the veterans we have been privileged to serve, and inspired by you, the men and



#### ◆ Anthony J. Principi, Former Secretary of Veterans Affairs

women who serve them. Thanks to you, the past 46 months define a chapter in my career and life, as well as for our Department, that must be marked down as "well-lived." I thank you for what you achieved and I am confident that you will continue to build on your record of success and

service. Thanks to you, I will be proud to answer to the title of "former VA employee."

For the future, I wish you fair winds and following seas and I wish you well.

Thank you, Anthony J. Principi Former Secretary of Veterans Affairs



# A Message from the Under Secretary for Health

This past year was eventful and productive for the Veterans Health Administration (VHA). Once again, VHA led the nation in eighteen of eighteen measurements of health care quality. For the fifth year in a row, our Department set the benchmark for patient satisfaction in Secretary for Health the American Customer Satisfaction Index for inpatient, outpatient

and pharmacy care. And our quality survey scores from Joint Commission on Accreditation of Healthcare Organizations exceeded the national average of all health care providers.

All of our successes are thanks to you, the men and women who give life to President Lincoln's charge to care for those who have borne the battle and their families. You have made VHA a model system, characterized by patient-centered, high quality, high value health care. Everywhere I have traveled in this past year, I have seen your enthusiastic spirit, your creativity and, above all, your dedication to duty.

Foremost among the challenges we face in 2005 is our continuing effort to improve the service we provide to our nation's newest veterans, especially those who return ill or injured from Iraq and Afghanistan. However, we must also improve our management practices to insure that the funds the taxpayers entrust to us are used properly to improve veterans' health; meet our veterans' increased needs for long-term care and mental health; and hold open the door to an uncomplicated passage from servicemember to civilian in every way possible for those who will be leaving the service in the coming year.

I am privileged to have the opportunity to serve veterans, and you, as Under Secretary for Health. I believe that if we seize the initiative today, we can lay the ground work together to maintain and increase our world leadership in quality, not only for 2005, but for 2010, 2015 and many more years to come.

Sincerely, JONATHAN B. PERLIN, MD, PHD, MSHA, FACP Under Secretary for Health

#### Continued from page 1

Researchers examined the medical records of nearly 600 VA patients and about 1,000 non-VA patients with similar health problems. Then, researchers compared the treatment received by both groups to well-established standards for medical care for 26 conditions. They found that about 51 percent of non-VA patients received care that met the latest standards of the health care profession, compared with 67 percent for VA patients. For preventative care, such as pneumonia vaccination and certain cancer screenings, 64 percent of VA patients received the appropriate care, compared to only 44 percent in the private sector.

Researchers attributed the difference to technological innovations, such as VA's computerized patient records, and to policies holding top managers accountable for standards in preventative care and the treatment of long-term conditions.

The RAND study, done in cooperation with the University of California at Los Angeles and the University of Michigan, was published in the Annals of Internal Medicine. It is available at www.rand.org/publications.

SPRING 2005

### MARTINSBURG VA MEDICAL CENTER HAPPENINGS

## Rivera Appointed as New Director at Martinsburg

▼ Fernando O. Rivera, Director, Martinsburg VA Medical Center



Fernando O. Rivera was appointed Director of the **Martinsburg VA Medical** Center effective January 9, 2005. As the Director, he is responsible for the oversight of the 69-bed acute care hospital, the 178-bed nursing home care unit and the 312-bed rehabilitation domiciliary care program. Additionally, he is responsible for the provision of care to 126,000 veterans, with a budget of \$132 million and staff of approximately 1,100.

Prior to his move to Martinsburg, Rivera served as the Associate Director at the VA Medical Center in New Orleans, Louisiana. As the Associate Director, he functioned as the Chief Operating Officer of a 354-bed acute care referral hospital that served over 40,000 veteran patients with a budget of approximately \$220 million.

Rivera, who is an active member of the American College of Healthcare Executives, earned a Bachelor's Degree in

**Civil Engineering and Masters** in Business Administration. Additionally, he graduated from the US Medicine Institute Leadership Program and the Veterans Health Administration Healthcare Leadership Institute. Among his many honors and awards, Rivera is the proud recipient of the Vice President's Hammer Award, the Department of Veterans Affairs Engineer of the Year Award and the VA **Deputy Secretary's Financial** Efficiency Award.

# Martinsburg Applauds MCCR Staff

For the sixth consecutive year, the **Medical Care Cost Recovery** (MCCR) staff at the Martinsburg VA Medical Center exceeded the **Medical Care Collection Fund** (MCCF) collection goal. The fiscal year (FY) 2004 collection goal of \$12,143,930 was exceeded by \$227,856, which reflects collecting 70.4% of the total billable amount for FY 04. This magnificent feat was accomplished through the cooperation and combined efforts of all MCCF process-involved staff, ranging from the Intake Personnel to the Clinical Providers. The MCCR collection goal was established at the VISN level and is a critical part of the medical center budget. Kudos to all the staff who contributed to this outstanding accomplishment. Keep up the excellent work!

## **Care Coordination Home Telehealth Program**

In August 2004, Martinsburg's Care Coordination Home Telehealth (CCHT) program was initiated - extending health care into the home of veteran patients. This program is especially important to ill patients who find it difficult to travel to the medical center. Care Coordination is the program where selected patients are monitored using the latest in-home technologies. Changes in vital signs, weight, blood sugar and other measures alert the CCHT team that follow-up treatment may be indicated. The objective of the CCHT is to provide improved access to care, independence, continuity of care and quality of life for the veterans in the program.

Patients with congestive heart failure, chronic obstructive pulmonary disease, diabetes mellitus and post traumatic stress disorder are the primary enrollees in this program. In some instances, additional criteria have been established for enrollment. There are four basic requirements for participation including referral from a provider, telephone service in the home, willingness to participate and learn and cognitive ability.

Various types of equipment are available and provided at no charge to support the monitoring needs of individual patients. Additionally, there are no phone charges since information is transmitted via a toll-free number. The equipment used in the program does not require a dedicated phone line and does not interfere with daily phone use. Secure web sites are used to view patient information for assessment and follow-up treatment as necessary. Vital sign information is documented in the patient's electronic chart, along with the patient's answers to symptoms, behavior and educational questions. If a measurement falls outside the established criteria, the clinical care coordinator may directly contact the patient to discuss any concerns, or may consult with the provider to evaluate treatment plans. This just-in-time follow-up can help the patient to avoid a health care crisis, as well as hospitalizations or visits to the emergency room and outpatient clinic.

The overall goal of the program is to provide the right care, in the right place, at the right time to achieve optimal health care outcomes. CCHT empowers veterans and their families to enjoy the highest quality of life in their homes, utilizing Home Telehealth technologies as the tool for collecting, transmitting and providing coordinated health care services.

#### VA MARYLAND HEALTH CARE SYSTEM HAPPENINGS

# State-of-the-Art Endoscopy Center and Upgraded Cardiac Catheterization Laboratory Opens at Baltimore VA Medical Center

he Baltimore VA Medical Center officially celebrated the opening of its new Gastroenterology (GI) and Pulmonary Endoscopy Center, as well as the recently upgraded Cardiac Catheterization Laboratory at an open house in January 2005. Both facilities, the former located on the hospital's third floor and the latter located on the fourth, are equipped with state-of-the-art technologies and are designed to improve the quality of care for patients receiving endoscopic and cardiac catheterization services.

The \$1.1 million Gastroenterology and Pulmonary Endoscopy Center is a combined suite for GI and pulmonary services. The expanded lab, with capabilities for colonoscopy, upper endoscopy, sigmoidoscopy and several other specialized endoscopic procedures as well as pulmonary function testing, has more than doubled its former size with 5,800 square feet of space. In addition to a centralized waiting area for patients undergoing both GI and pulmonary testing, the facility houses five large procedure rooms, two pulmonary function laboratories, an expanded recovery area with eight beds, a nurses' station, a conference room and office space.

"This state-of-the-art lab was developed to better serve the needs of the veteran popula-



Ready to cut the ribbon to celebrate the opening of the newly renovated Gastroenterology & Pulmonary Center and the upgraded Cardiac Catheterization Lab at the Baltimore VA Medical Center are: Dr. Robert Peters, Chief, Cardiology Section; Dr. Keith Wilson, Chief, GI Lab; Dennis H. Smith, Director, VA Maryland Health Care System; Dr. Nevins Todd, Chief, Pulmonary Section; and Dr. Barry Reicher, Chief, Cardiac Catheterization Lab.

tion, within which there is a growing and prevalent need for endoscopic services," explained Dr. Keith Wilson, Chief of Gastroenterology at the Baltimore VA Medical Center. Dr. Wilson estimates the new lab will perform close to 3,000 endoscopic procedures this year.

With completely upgraded computer equipment, a brand new endoscope and a separate room dedicated for advanced procedures like ERCP (Endoscopic Retrograde

Cholangiopancreatography) — a sophisticated procedure used to diagnose and treat disorders of the bile ducts, pancreas, and gallbladder — the new Endoscopy center has dramatically increased its capabilities.

Improved patient flow, decreased turnaround time, and a centralized area for patient intake, recovery and discharge also contribute to the extremely high level of care patients are receiving in this new GI lab. An average of four to five procedures a day are conducted in the new facility, which also provides pulmonary procedures, including simple spirometry as well as sophisticated physiologic testing.

During the past 30 years, the number of cardiac catheterization procedures has increased 315%, according to a recent issue of Cath Lab Digest, making it one of the fastest-growing clinical services. To meet this growing need, the Baltimore VA Medical Center's newly upgraded Cardiac Catheterization Laboratory now houses all new state-of-the-art equipment and technologies. Located one level up from the GI suite, the Cardiac Cath Lab provides superior diagnostic, imaging and intervention services, placing the hospital on the cutting edge of interventional cardiology.

# Fort Howard Lease Negotiations Nearing Completion

**¬** he Office of Asset Enterprise Management in VA Central Office has announced that the process for approving the development of a veteran-focused retirement community on the campus of the former Fort Howard VA Medical Center should be finalized by spring 2005. The VA signed a memorandum of understanding (MOU) with Fort Howard Senior Housing Associates, LLC, of Washington, DC, on January 20, 2004, regarding the development of the Fort Howard campus. Since the signing of the MOU, VA and Fort Howard Senior Housing Associates have been busy preparing environmental impact studies, reviewing construction plans for a new VA outpatient clinic at Fort Howard, holding meetings with the State Historical Preservation Office and Baltimore County representatives, and finalizing a development plan and pricing structure for the campus. VA and Fort Howard Senior Housing Associates are also negotiating the terms of a long-term Enhanced-Use Lease of the property for development as a veteran-focused retirement community.

Numerous veterans and local community members have already registered to receive information about Bayside at Ft. Howard,

the name selected for the proposed retirement community. Fort Howard Senior Housing Associates has established a toll free information line and an e-mail address for interested individuals to register to receive updates about Bayside at Ft. Howard. The toll free phone number for Bayside at Ft. Howard is 1-866-698-9731 and the e-mail address is: info@baysidefthoward.com. A web site for Bayside at Ft. Howard is under construction and is expected to be operational by May 1, 2005, to provide additional information about the project.

Immediately following the review process and the signing of the lease agreement, another round of town hall meetings will be held to provide the local community and veterans service organizations with the final plans and timelines for the campus, including housing options for seniors and the pricing structure for the various units that will be available. Local community members and veterans service organization representatives will also be invited to participate in a formal groundbreaking ceremony that will be scheduled following the signing of the lease agreement and just prior to construction of the first phase of the retirement community.

SPRING 2005 5

#### **WASHINGTON DC VA MEDICAL CENTER HAPPENINGS**

# The Future of Open-Heart Surgery: DCVAMC First in VA to Use New Mini-Bypass Technology

The Washington DC VA Medical Center (DCVAMC) is proud to be among the first hospitals in the nation, and the first VA hospital, to implement the new "mini bypass" in open-heart surgery.

When cardiothoracic surgeons work their magic during open-heart surgery, all motion of the heart and lungs must be stopped. In order to achieve this pause in action, a cardiopulmonary bypass (CPB) is necessary. The technology for CPB was developed in 1953 and has been used in hundreds of thousands of successful surgeries — but, as with all surgeries, there are risks.

The main components of CPB, more commonly known as the heart-lung machine, are a mechanical pump and an oxygenator. "This lifesaving technology can be very stressful for some patients, making survival much more challenging for the sickest," says Gregory D.

Trachiotis, MD, the Associate Chief of Cardiothoracic Surgery at the DCVAMC and the Associate Professor of Surgery, Division of Cardiothoracic Surgery, at The George Washington University.

Use of the mini bypass reduces blood to air contact, hemodilution and blood and blood product transfusion. Its size and portability means fewer traumas to the heart.

"The mini-pump has big advantages over traditional cardiopulmonary bypass. I believe it is likely that the mini-pump will replace the conventional form of CPB as the gold standard for most cardiac procedures over time," says Dr. Trachiotis.

### New VA Secretary Visits Washington DC VA Medical Center

On February 8, 2005, the new Secretary of Veterans Affairs, James "Jim" Nicholson visited the Washington DC VA Medical Center. He was accompanied by Dr. Jonathan Perlin, Acting Under Secretary for Health and General Andy Love, AF (Ret). Sanford Garfunkel, Medical Center Director, provided an overview of the facility and Dr. Ross Fletcher, Chief of Staff, gave a demonstration of the computerized patient record system (CPRS). The Secretary and General Love were then given a brief tour of several services including Eligibility, Primary Care, the Surgery inpatient ward, the Surgical Intensive Care Unit, the Comprehensive Nursing and Rehabilitation Center and Renal Dialysis.

# Washington DC VA Medical Center Chief of Staff on the Cover of Federal Computer Week



r. Ross Fletcher, the Chief of Staff at the Washington DC VA Medical Center (DCVAMC), was featured on the cover of the February 21, 2005 issue of Federal Computer Week as part of an article by Bob Brewin. Brewin spent an afternoon at the DCVAMC receiving orientations from staff members on the use of technology at the medical center. In addition to Dr. Fletcher, Kay Craddock, the nurse and clinical applications coordinator at the medical center, is also mentioned in the article. Brewin's article entitled, "VA gets fit with tech: Health care system's users find technology reduces problems," praises both VA's Veterans Health Information Systems and Technology Architecture

(VISTA) and bar code medication administration (BCMA) programs for their assistance in reducing medical errors and improving overall health care. In addition, he describes VA technology as far ahead of that of private hospitals.



The Washington DC VA Medical Center welcomes and congratulates the following new Service Chiefs (L to R): Steve Robinson, Acquisition & Materiel Management Service; Jenny McBurney, Fiscal Service; Debbie Amdur, Social Work Service; and Michael D'Andrea, Human Resource Management Service.